



Membership Application Form

Bernalillo County / Parks and Recreation Intel Computer Clubhouse



Name: _____ Age: _____

Street: _____ Apt: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Birth Date: _____

Name of School: _____ Grade: _____

Name of Parent or Guardian: _____

Relationship: _____ Work Phone: _____

I give permission for _____ to participate in the activities
(youth's name)

at the Computer Clubhouse. I give my consent to the Intel Computer Clubhouse Network and Bernalillo County to use and publish for any purpose whatsoever, photographs, film, tape and images taken of him/her. All materials property of the Intel Computer Clubhouse Network and Bernalillo County are the sole property of the Intel Computer Clubhouse Network and Bernalillo County and may be used for any purpose. I release the Intel Computer Clubhouse Network and Bernalillo County from any and all claims arising from injury at the Clubhouse site.

(Signature of parent or guardian)

Date

(Signature of youth)

For more information contact Kala Naranjo at the Computer Clubhouse at 505-452-184